PTO/SB/21 (01-09) Approved for use through 02/28/2009. OMB 0651-0931

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE he Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/820,383 TRANSMITTAL Filing Date April 8, 2004 First Named Inventor **FORM** Peter Seitz Art Unit 2622 Examiner Name Yenke, Brian P... (to be used for all correspondence after initial filing) Attorney Docket Number 0154.0285US1

Total Number of Pages in This Submission 3											
ENCLOSURES (Check all that apply)											
<b>✓</b>	Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement			Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revo Change of Corresponder Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table of					Appea	Allowance Communication to TC  I Communication to Board eals and Interferences	
							e Address	☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  Proprietary Information  Status Letter Other Enclosure(s) (please Identify below):  turn receipt postcard		
	Certified Copy of Priority Document(s)  Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53			Rem	,						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT											
Firm Name Houston Elicogva			on Elisogva LLI	-P/7 /							
Signature											
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Date		February 13, 2009				Reg. No.	35,900				
CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on											
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PTO/SB/17 (10-08) Approved for use through 06/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. Consolidated Appropriations Act, 2005 (H.R. 4818). 10/820,383 **Application Number** RANSMIT Filing Date April 8, 2004 For FY 2009 First Named Inventor Peter Seitz **Examiner Name** Yenke, Brian P. Applicant claims small entity status. See 37 CFR 1.27 Art Unit 2622 TOTAL AMOUNT OF PAYMENT 270 Attorney Docket No. 0154.0285US1 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: 504102 Deposit Account Name: Houston Eliseeva LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) <u>Fee (\$)</u> Fee (\$) Fee (\$) Utility 330 165 540 220 270 110 Design 220 110 100 140 50 70 Plant 220 110 330 170 165 85 Reissue 330 165 540 650 270 325 Provisional 220 110 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) **Fee Description** Fee (\$) Each claim over 20 (including Reissues) 52 26 Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195 **Total Claims** Extra Claims Multiple Dependent Claims Fee (\$) Fee Paid (\$) Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Total Sheets (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): Notice of Appeal 270

SUBMITTED BY

Signature

Registration No. (Attorney/Agent) 35,900

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Date February 13, 2009

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